

**CALIFORNIA EMERGENCY MANAGEMENT AGENCY (Cal EMA)  
LAW ENFORCEMENT AND VICTIM SERVICES (LEVS) DIVISION  
CAL MMET PROGRAM – PERFORMANCE SITE VISIT**

Public Safety Branch ☒

Drug Enforcement Section ☒

GRANT NUMBER	GRANT AWARD PERIOD	GRANT AWARD AMOUNT
ZM09010470	03/01/10 – 02/28/12	161,117

PROGRAM NAME:	County of Siskiyou
PROJECT TITLE:	Cal MMET Enforcement Team Recovery Act Program

(1) ADMINISTRATIVE AGENCY:	County of Siskiyou
(2) IMPLEMENTING AGENCY:	Sheriffs Office
(3) PROJECT DIRECTOR:	Michael Murphy, Undersheriff
Address:	311 Lane Street Yreka, CA 96097
Phone:	530-842-8300
(4) PROJECT COORDINATOR:	Camy Rightmier
Alternate Contact (Designee):	
Date of Visit: 4-27-10	Visit Conducted By: Laurie Ballard

**PERSON(S) INTERVIEWED/CONTACTED DURING THE VISITATION**

Date	Name	Title within Agency	Job Title (Project)

\_\_\_\_\_  
Signature of Cal EMA Representative Conducting the Visit

5.28.10  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Section Chief

5/28/10  
\_\_\_\_\_  
Date

**CAL MMET PROGRAM  
PERFORMANCE SITE VISIT FORM**

**I. PROGRAMMATIC REVIEW**

**A. General**

**YES      NO      N/A**

1. Does the project being visited fit within one of the following categories? (check only one) [✓]

<b>X</b>		
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- ☐ 2<sup>nd</sup> Year;  
☐ 3<sup>rd</sup> Year;  
☐ Over three years, (Please specify) \_\_\_\_\_ years.

**2. Operational Documentation**

Does the project have current versions of the following:

- a. Recipient Handbook  
b. Program Guidelines  
c. Grant Award Agreement

X		
		X
X		

**3. Goals, Objectives, and Project Activities**

*(Review the project's responses to the goals, objectives, and activities of the Grant Award Agreement.)*

- a. Is the project meeting the programmatic requirements set for this program?  
*If no, has the project discussed the possibility of submitting a grant award modification?*

X		
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- b. Is the project making satisfactory progress toward achieving the goals and objectives? If not, please explain.

X		
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**4. Progress Reporting**

*(Review the progress report format, content and submission requirements.)*

- a. Has the project submitted all required reports on time? If not, please explain.

X		
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- b. Has the project kept accurate source documentation to support statistical data on the progress report?

X		
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**CAL MMET PROGRAM  
PERFORMANCE SITE VISIT FORM**

**I. PROGRAMMATIC REVIEW (continued)**

	YES	NO	N/A
<b>5. Programmatic Source Documentation</b>			
<i>(Review documents maintained by the project that represents data reported on progress reports.)</i>			
a. Has the project developed an information retrieval system that will accurately support the projects data on the Progress Report form? <i>(This system may be automated or manual.)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does the project use data summary sheets, actual case records, or other concrete documents that validate project performance?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6. Project Staff Duties &amp; Responsibilities</b>			
<i>(Assure that project staff have made other project staff available for interviews during the visitation.)</i>			
a. Have all grant funded project staff positions been filled? If no, please explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are job descriptions "project specific", rather than a copy of the "county" local agency job classification/position description?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Are staff performing duties discussed in the Grant Award Agreement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Have project staff assumed duties for more than one Cal EMA funded project? If yes, please explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Are there any programmatic problems that are unique to this project? If yes, please explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>7. Program Specific Requirements</b>			
a. Are Project Income Reporting forms completed and mailed to Cal EMA on a quarterly basis? <i>(Only required if asset forfeiture funds are received and/or expended.)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Is a copy of the signed DEC Protocol MOU in file?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	



# CAL MMET PROGRAM PERFORMANCE SITE VISIT FORM

## I. PROGRAMMATIC REVIEW (continued)

	YES	NO	N/A
c. Are there outstanding issues related to carrying out the DEC Protocol requirements? If yes, please explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Is a copy of the Operational Agreement in file?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the Operational Agreement dated and signed by all participating agencies? If no, please explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## II. ADMINISTRATIVE REVIEW

### A. General

#### 1. Program Files

- a. Is the project familiar with preparation requirements for the following frequently used Cal EMA forms:

(1) Form 2-223, Grant Award Modification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Form 2-201, Report of Expenditures and Request for Funds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### 2. Personnel Policies

a. Are written personnel policies in place and available to all employees? Method <i>orientation and agency intranet</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Do the policies discuss work hours, compensation rates, including overtime, and benefits; vacation, sick, or other leave allowances, hiring and promotional policies? <i>Sheriff has info on salaries</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**CAL MMET PROGRAM  
PERFORMANCE SITE VISIT FORM**

**II. ADMINISTRATIVE REVIEW (continued)**

**YES      NO      N/A**

**B. Financial Requirements**

**1. Functional Time Sheets**

- |   |                                     |                          |                          |
|---|-------------------------------------|--------------------------|--------------------------|
| a. Does the project use a Functional Time Sheet for all project positions employed less-than fulltime?              | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are functional time sheets completed correctly?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is the percent (%) of time project staff spend on other non-project duties being tracked?<br>(Review timesheets) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**2. Duties of the Financial Officer**

- |   |                                     |                          |                          |
|---|-------------------------------------|--------------------------|--------------------------|
| a. Has the project taken steps to assure that the duties of the financial officer are separate from that of the bookkeeper and project director? (separation of duties) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Who signs checks? <i>Leanna Dancer</i> _____<br>Who approves purchases <i>Camy Rightmier</i> _____   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**C. Financial Source Documentation**

- |  |                                     |                                     |                          |
|--|-------------------------------------|-------------------------------------|--------------------------|
| 1. Does the project maintain updated budget pages on all approved grant award modifications?                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 2. Does the project maintain Confidential funds?<br>If so, are protective safeguards and policies in place?<br>Describe: _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Has the project submitted Reports of Expenditures on time?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| 4. Does expenditure rate commensurate with the elapsed Period of the grant?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

**CAL MMET PROGRAM  
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**II. ADMINISTRATIVE REVIEW (continued)**

**YES      NO      N/A**

**D. Equipment**

**1. Acquisition**

- a. Are equipment purchases authorized budget items? ☒ ☐ ☐
- b. Was equipment purchased in accordance with the Grant Award Agreement? ☒ ☐ ☐

**E. State/Federal Administrative Requirements**

**1. Mandated State and Federal Programs**

*(Determine whether or not the following documents are posted at the site visited)*

- a. A current Equal Employment Opportunity (EEO) Policy Statement? ☒ ☐ ☐
- b. A current "Harassment or Discrimination in Employment is Prohibited by Law" poster? ☒ ☐ ☐
- c. A current Drug-Free Workplace Policy statement? ☐ ☐ ☐
- d. Documentation of the California Environmental Quality Act (CEQA) on file? ☐ ☒ ☐

**F. EEO Policy Review**

**III. PROGRAMMATIC, ADMINISTRATIVE, AND FINANCIAL DISCUSSIONS**

*(Provide a summary of observations, findings, and recommendations made during the visit)*

Thank you for your time and cooperation during my site visit of your CalMMET Program on April 27 and 28, 2010. I commend you for being so well organized and meticulous with the presentation of program materials. Overall, the project meets or exceeds most grant requirements; however, the following findings include actions required in order to bring the project into full grant compliance.

A. California Environmental Quality Act (CEQA)

Finding: Unable to locate any documentation on CEQA Policy.

Corrective Action: I was unable to locate anything at Cal EMA that would assist you in meeting this objective. Please contact your Environmental Services Office and request a copy for the main office as well as the task force location.

B. Project Specific Duty Statements

Finding: Not available at time of visit

Corrective Action: Camy has since submitted project specific duty statements for people employed under the grant.

C. Progress Reporting

Finding: Siskiyou County acts as the lead agency over the 5 County Rural Initiatives. I am concerned that each county provides statistics to Siskiyou however; there is no way for Siskiyou to verify the accuracy of information reported. It's more of an "honor system".

Corrective Action: I explained the importance of timely submissions of progress reports especially in terms of the ARRA grants. I believe that this coming year reports will be submitted on time.

This program had several issues arise during grant period and therefore was not put into agreement until March, 2010. I don't believe these issues will be present in the next grant cycle and therefore, have no concerns.

I remain concerned about the role of a fiduciary county in terms of participating agency accountability. Fiduciary County will be responsible for other counties lack of records or insufficient reporting. The only corrective action would be to disallow joint county applications.

I obtained copies of time cards as documentation for Functional Time Sheets, as well as samples of how counties invoice.



## PERFORMANCE ASSESSMENT/SITE VISIT REPORT

### Drug Enforcement Section

#### Anti-Drug Abuse (ADA) Enforcement Team Recovery Act Program

#### California Multi-Jurisdictional Methamphetamine Enforcement Team (Cal-MMET) Recovery Act Program

### AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009 (ARRA) PROGRAMMATIC REVIEW

- |  | YES                                 | NO                       | N/A                      |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Is the project aware that they must provide Cal EMA with a <u>valid</u> Data Universal Numbering System (DUNS) Number for the implementing agency and not the County's DUNS number? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

- |  |                                     |                          |                          |
|--|-------------------------------------|--------------------------|--------------------------|
| 2. Is the project aware of the Central Contractor Registry (CCR) requirements? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o Register with a valid DUNS number; and                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o Renew CCR registration yearly for the life of the grant.                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

- |   |                                     |                          |                          |
|---|-------------------------------------|--------------------------|--------------------------|
| 3. Does the project understand that they report Section 1512(c) information to Cal EMA and <u>not</u> to FederalReporting.gov directly?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o Report the total number of hours worked for each ARRA funded position on the Jobs Data Collection Sheet; and  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o Completed Jobs Data Collection Sheets are due to Cal EMA by the 3 <sup>rd</sup> working day of each month for JAG funded programs and by the 10 <sup>th</sup> day of the each month for VOCA or VAWA funded programs. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o Failure to submit Jobs Data by the due date could result in the project's award being suspended and/or revoked.   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:

- |  |                                     |                          |                          |
|--|-------------------------------------|--------------------------|--------------------------|
| 4. Does the project understand that by accepting the grant award, they agreed to:  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o Track, account for, and report on all ARRA funds (including specific outcomes and benefits attributable to Recovery Act funds) separately from all other funds, including Cal EMA award funds from non-ARRA awards awarded for the same or similar purposes or programs. (ARRA funds may be used in conjunction with other funding as necessary to complete projects, but tracking and reporting of ARRA funds must be separate.); and | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o Accounting systems must ensure that ARRA funds are not commingled with funds from any other source.  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments:



## PERFORMANCE ASSESSMENT/SITE VISIT REPORT

5. Is the project familiar with Office of Management and Budget, OMB Circulars which govern their organization? Circulars may be found at [www.whitehouse.gov/omb/circulars](http://www.whitehouse.gov/omb/circulars).

☒ ☐ ☐

Comments:

6. Is the project aware that potential fraud, waste, or abuse must be promptly referred to the federal Department of Justice, Office of the Inspector General? Additional information is available from the DOJ OIG website at [www.usdoj.gov/oig](http://www.usdoj.gov/oig).

☒ ☐ ☐

Comments:

7. Is the project aware that ARRA funds cannot be used by any State or local government, or any private entity, for construction costs or any other support of any casino or other gambling establishment, aquarium, zoo, golf course, or swimming pool.

☒ ☐ ☐

Comments:

8. Does the project understand that by accepting the grant award, they:
- Agreed to provide Cal EMA, federal DOJ (including OJP and the Office of the Inspector General (OIG)), and its representatives, and the Government Accountability Office (GAO), access to and the right to examine all records (including, but not limited to, books, papers, and documents) related to ARRA funds, including such records of any subrecipient, contractor, or subcontractor; and
  - Acknowledges that Cal EMA, federal DOJ and the GAO are authorized to interview any officer or employee of the recipient (or of any subrecipient, contractor, or subcontractor) regarding transactions related to this Recovery Act award.

☒ ☐ ☐

☒ ☐ ☐

Comments:

9. Is the project aware of the Performance Measures and reporting timeline for ARRA funded programs:
- Reporting of Performance Measures will be accomplished using BJA's Performance Measurement Tool (PMT);
  - PMT reports must be completed on a quarterly basis (i.e., July 15, October 15, January 15, and April 15) for the life of the grant; and
  - Failure to submit PMT reports by the due date could result in the project's award being suspended and/or revoked.
- (Specific to Recovery JAG funded programs only).*

☒ ☐ ☐

☒ ☐ ☐

☒ ☐ ☐

Comments:

## PERFORMANCE ASSESSMENT/SITE VISIT REPORT

10. For existing staff positions, does the project have documentation that the position would have been eliminated if not for Recovery Act funding?

Documentation may include:

- Budget comparisons and/or projections before and after the Recovery Act award date
- Formal layoff recommendations and retractions (memos, reports)

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Comments:

No full time positions funded - only OT  
or part-time

### SECTION IV - ADDITIONAL COMMENTS:

NOTES: